

991

RATE AGREEMENT
RESEARCH PATIENT CARE

DATE: September 05, 2002

EIN: 1340714565A1

HOSPITAL:

Cleveland Clinic Foundation - PCR
17325 Euclid Avenue
Cleveland, Ohio 44112

FILING REF: The preceding
Agreement was dated
June 28, 1999

The rates and/or amounts approved in this agreement are for use on grants, contracts and other agreements with the Department of Health and Human Services, subject to the conditions in Section II.

SECTION I: RESEARCH PATIENT CARE RATES/AMOUNTS

TYPE OF RATES/AMOUNTS: Fixed, Final, Prov. (Provisional), Prod. (Predetermined)

<u>Effective Period</u>		<u>Rates/Amounts and Applicability</u>
<u>Type</u>	<u>From</u> <u>To</u>	<u>General Clinical Research Center:</u>
Final	01/01/99 12/31/01	Inpatient Routine Care Cost- \$424.69 Per Day
Final	01/01/99 12/31/01	Ancillary Services - % of Standard Fee Schedule Charges
		Operating Room 44.7%
		Recovery Room 60.1%
		Cardiac Perfusion 56.8%
		Anesthesiology 25.8%
		Radiology - Diagnostic 60.4%
		Laboratory 27.3%
		Blood 00.0%
		Respiratory Therapy 18.2%
		Cardiac Disease 45.7%
		Electro-cardiology 19.4%
		Electroencephalography 20.9%
		Drugs 50.0%
		Renal Dialysis 50.1%
		Emergency Room 57.4%
		Radiology Therapeutic 32.8%
		Speech Pathology 53.8%
		Laboratory - Pathology 79.3%
		Gastro Intestinal Services 56.2%

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HOSPITAL:
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Agreement Date: September 05, 2002

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SECTION I: RESEARCH PATIENT CARE RATES/AMOUNTS (CONTINUED)

TYPE OF RATES/AMOUNTS: Fixed, Final, Prov. (Provisional), Pred. (Predetermined)

<u>Effective Period</u>		<u>Rate/Amounts and Applicability</u>
<u>Type</u>	<u>From</u> <u>To</u>	<u>General Clinical Research Center:</u>
Prov.	01/01/02 UNTIL AMENDED	Inpatient Routine Care Cost- \$473.35 Per Day
Prov.	01/01/02 UNTIL AMENDED	Ancillary Services - % of Standard Fee Schedule Charges
		Operating Room 36.2%
		Orthotics/Prosthetics 100.6%
		Recovery Room 68.0%
		Delivery Room & Labor Room 58.1%
		Perfusion Services 56.6%
		Anesthesiology 26.1%
		Radiology - Diagnostic 56.4%
		Ultra Sound 30.5%
		Cat Scan 10.7%
		Nuclear Medicine 32.9%
		MRI 17.5%
		Radiology Therapeutic 21.5%
		Laboratory 27.1%
		Oncology 51.9%
		Histocompatibility 129.4%
		Blood 47.8%
		Respiratory Therapy 15.6%
		Physical Therapy 45.4%
		Occupational Therapy 43.4%
		Cardio Disease 40.6%
		Vascular Lab 34.4%
		Speech Pathology 45.7%
		Lab - Pathological 54.5%
		Electro-cardiology 24.3%
		Electroencephalography 22.5%
		Gastro Intestinal Services 33.3%
		Procedure Room/ET 70.0%
		Drugs 37.5%
		Renal Dialysis 42.8%
		ASC 47.9%
		Emergency Room 46.8%
		Observation Room 37.9%

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NO. 9925 P. 2

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MAR. 4. 2003 9:00AM

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Hospital:

Cleveland Clinic Foundation - PCR

Agreement Date: September 05, 2002

SECTION II: GENERAL

A. LIMITATIONS: The rate(s) in this Agreement is subject to any statutory or administrative limitations and apply to a given grant, contract, or other agreement only to the extent that funds are available. Acceptance of the rate(s) is subject to the following conditions: (1) Only costs incurred by the organization were included in its indirect cost pool as finally accepted; such costs are legal obligations of the organization and are allowable under the governing costs principles. (2) The same costs that have been treated as indirect costs are not claimed as direct costs. (3) Similar type of costs have been accorded consistent accounting treatment. (4) The information provided by the organization which was used to establish the rate(s) is not later found to be materially incomplete or inaccurate.

B. ACCOUNTING CHANGES: If a fixed or predetermined rate(s) is contained in this Agreement, it is based on the accounting system in effect at the time the agreement was negotiated. Changes to the method of accounting for costs which affect the amount of reimbursement resulting from the use of this Agreement require prior approval of the authorized representative of the cognizant agency. Such changes include, but are not limited to, changes in the charging of a particular type of costs from indirect to direct. Failure to obtain such approval may result in costs disallowances.

C. FIXED RATES: If a fixed rate(s) is contained in this Agreement, it is based on an estimate of the costs for the period covered by the rate(s). When the actual costs for this period are determined, an adjustment will be made in a subsequent Agreement to compensate for the difference between the costs used to establish the fixed rate(s) and actual costs.

D. USE BY OTHER FEDERAL AGENCIES: The rate(s) in this Agreement is approved in accordance with the cost principles promulgated by the Department of Health and Human Services, and should be applied to grants, contracts and other agreements covered by these regulations, subject to any limitations in A above. The hospital may provide copies of this Agreement to other Federal Agencies to give them early notification of the Agreement.

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MAR. 4. 2003 9:00AM

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Hospital:

Cleveland Clinic Foundation - PCR

Agreement Date: September 05, 2002

SECTION II: GENERAL

E. SPECIAL REMARKS

Equipment Definition -

Equipment means an article of nonexpendable, tangible personal property having a useful life of more than two years and an acquisition cost of \$1,000 or more per unit.

By the Hospital:
Cleveland Clinic
Foundation - PCR

(Organization)


(Signature)

Steven C. Glass
(Name)

Controller/Chief Accounting Officer
(Title)

9/18/02
(Date)

By the Cognizant Agency:
Department of Health & Human Services

(Agency)


(Signature)

Henry Williams
(Name)

Director, Division of Cost Allocation
(Title)

September 05, 2000
(Date) 5566

DHHS Representative: Narendra Gandhi
Telephone: 214-767-3230

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NO. 9925 2. 4

214 767 3264 PSC/DCA-CSFO MAR. 4. 2003 9:00AM

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